



Commonwealth  
of Massachusetts

Center for Health  
Information and Analysis

# All Payer Claims Database Data Volume Reports

## 2008 - 2012

### March 2013

The Commonwealth of Massachusetts established an All Payer Claims Database (APCD) in 2010 as one of the largest data collection efforts undertaken by the state. Regulation 114.5 CMR 21.00, Health Care Payer Claims Data Submissions, requires health insurance payers to submit medical, pharmacy, and dental claims, as well as information about member eligibility, benefit design, and providers to the Center for Health Information and Analysis (CHIA) for Massachusetts residents. The goals of the APCD are to provide administrative simplification to payers and to provide access to timely, accurate, and relevant data for improving quality, mitigating costs, and promoting transparency in the health care delivery system.

The charts below depict the number of records submitted to the Center as of December 2012 by health insurance payers. These Data Volume Reports are a concise way of presenting the amount of APCD data collected by year and file type.

Please feel free to submit any questions related to the reports to the Center's APCD mailbox: [CHIA-APCD@state.ma.us](mailto:CHIA-APCD@state.ma.us).

Thank you for your interest in the All Payer Claims Database.

Commonwealth of Massachusetts-Center for Health Information and Analysis (CHIA)  
APCD Data Volume Reports 2008-2012 (based on data received by 12/19/2012)

The Lincoln National Life Insurance Company														
File Type*	Submission Year	January	February	March	April	May	June	July	August	September	October	November	December	Total
PR	2010	0	0	0	0	0	0	0	0	0	0	0	2	2
PR	2011	0	0	2	0	2	2	0	0	2	0	0	2	10
PR	2012	0	0	2	0	0	2	0	0	2				6
ME	2009	0	0	0	0	0	0	0	0	0	0	0	11,148	11,148
ME	2010	0	0	0	0	0	0	0	0	0	0	0	11,444	11,444
ME	2011	11,130	10,683	10,701	10,633	10,925	10,770	17,887	10,707	10,692	10,907	10,867	11,163	137,065
ME	2012	10,949	10,976	16,095	16,365	16,516	16,603	16,701	16,813	16,846	16,751			154,615
PV	2011	16,350	15,802	15,792	15,838	15,816	15,778	15,452	17,644	17,272	18,155	18,682	18,627	201,208
PV	2012	19,328	19,097	19,690	19,550	19,555	19,960	19,827	22,724	20,166	20,404	20,506		220,807
MC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
MC	2012	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2008	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2009	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2010	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2011	0	0	0	0	0	0	0	0	0	0	0	0	0
PC	2012	0	0	0	0	0	0	0	0	0	0	0	0	0
DC	2008	1,424	1,250	1,635	1,553	1,561	1,637	1,488	1,360	1,447	1,730	1,392	1,690	18,167
DC	2009	1,420	1,490	1,651	1,710	1,437	1,524	1,456	1,464	1,599	1,474	1,392	1,844	18,461
DC	2010	1,797	1,844	2,237	1,979	1,685	1,875	1,853	1,960	1,798	1,829	1,619	1,595	22,071
DC	2011	1,493	1,429	1,542	1,401	1,486	1,394	1,195	1,356	1,318	1,162	1,463	1,052	16,291
DC	2012	1,971	1,120	1,046	1,174	1,269	1,347	1,249	1,413	1,135	1,360	1,271		14,355

**\*Key:** PR=Product Records; ME=Member Eligibility Records; PV=Provider Records; MC=Medical Claim Lines; PC=Pharmacy Claim Lines; and DC=Dental Claim Lines.

**The Volume Report presents the APCD inventory as of December 2012 and reflects the related compliance requirements:**

- Medical, pharmacy, and dental submissions are required monthly beginning January 2008.
- Provider submissions are required monthly beginning January 2011. The May 2011 submission contains historical records from 2008 through May 2011.
- Product submissions are required quarterly beginning December 2010. The May 2011 submission contains historical records from 2008 through 2010 plus 2011, quarter one.
- Member eligibility submissions are required monthly beginning in January 2011. Prior to 2011, payers were required to submit two eligibility files: a December 2009 eligibility submission covering calendar years 2008 and 2009, and a December 2010 eligibility submission covering calendar years 2009 and 2010. Eligibility files contain data for twenty-four months of member eligibility.
- The APCD liaisons monitor and enforce compliance rules and authorize exceptions. Some carriers have incomplete data due to: exemptions from filing, limited claim or member base, phasing into APCD and are currently in testing or ramping up their production data filings, are in the process of updating specific submissions, and /or non-compliance.

**These numbers represent the number of records submitted, not actual counts of members, providers, products or claims.**







